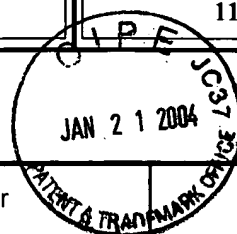


TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
114917-004

In Re Application Of: **Doug Wysong**



Serial No.
10/699,206

Filing Date
October 31, 2003

Examiner
Unknown

Group Art Unit
Unknown

Title: **PORTABLE PNEUMATIC BLOWER**

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

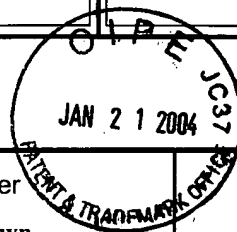
37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:
- ☐ the statement specified in 37 CFR 1.97(e);
- OR**
- ☐ the fee set forth in 37 CFR 1.17(p).

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
114917-004

In Re Application: **Doug Wysong**



Serial No.

10/699,206

Filing Date

October 31, 2003

Examiner

Unknown

Group Art Unit

Unknown

PORTABLE PNEUMATIC BLOWER

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **02-1818** as described below.
- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☒ Charge any additional fee required.

Certificate of Transmission by Facsimile*

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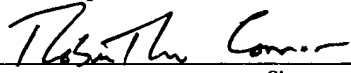
I certify that this document and fee is being deposited on **Jan. 15, 2004** with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Signature of Person Mailing Correspondence

Renee Street

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Signature

Dated: **January 15, 2004**

Robert W. Connors

Reg. No. 46,639

BELL, BOYD & LLOYD LLC

P.O. Box 1135

Chicago, IL 60690-1135

(312) 708-4214

CC:

JAN 21 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Doug Wysong
Appl. No.: 10/699,206
Conf. No.: Unknown
Filed: October 31, 2003
Title: PORTABLE PNEUMATIC BLOWER
Art Unit: Unknown
Examiner: Unknown
Docket No.: 114917-004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.56, 37 C.F.R. 1.97, and 37 C.F.R. 1.98, Applicants request that a citation and examination of the references cited below, and on the attached PTO-1449 form, be made during the course of examination of the above-identified application for United States patent. Pursuant to the Official Gazette Notice dated August 5, 2003, copies of the cited U.S. patents and patent applications are not included as this application was filed after June 30, 2003. However, copies of all other cited references are included with this form.

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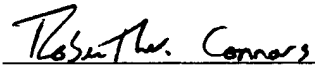
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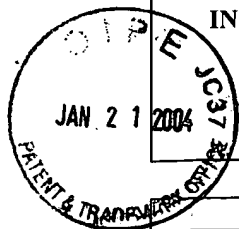
Applicants look forward to early and favorable consideration of this matter.

Respectfully submitted,

BELL, BOYD & LLOYD LLC

BY 
Robert W. Connors
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P.O. Box 1135
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Phone: (312) 807-4214

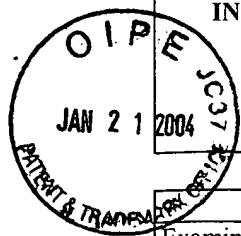
Dated: January 15, 2004



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| INFORMATION DISCLOSURE CITATION IN AN APPLICATION (Use several sheets if necessary) PTO Form 1449 | Atty Docket No. 114917-004 | Application No. 10/699,206 |
| | Applicant Doug Wysong | |
| | Filing Date Oct. 31, 2003 | Group Unknown |

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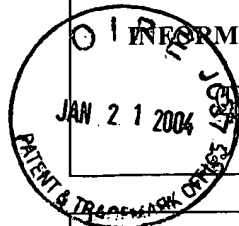
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| | Applicant Doug Wysong | |
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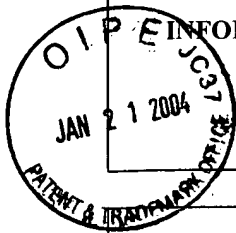
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| Examiner's Initials | |
|------------------------|--|
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|--|-------------------------|
| Examiner: | Date Considered: |
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